t S Department of Labor Office of Labor-Management Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No 1215-0188
Expires 11-30-2006

This report is mandatory under P L. 88-257 as amended Failure to compty may result in criminal prosecution, fines, or civil penalties as provided by 29 U S C 439 or 440

| F | or official use only Rec d NG 18PAID | |
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| E | RMS DED | |

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

| - Lims D89 | | | |
|--|--|--|--|
| 1 File Number U | 2. Fiscal Year Covered From | | |
| | 0[/01/2004 Through 12/31/2004 | | |
| 3 Name and address of person filing | 4 Name file number and address of labor organization | | |
| Name Joanne H Borts | Name Actors Equity Association | | |
| | Labor Organization File Number 006-029 | | |
| PO Box Bldg Room No if any 90 Actors' Equity Assn | P O Box, Building and Room Number if any | | |
| Street 165 West 46 Street | Street 165 West 46 Street | | |
| city New York | City New York | | |
| State NY ZIP Code +4, [0036 | State NY ZIP Code +4 [LOD36 | | |
| 5 Position in labor organization Eastern Regio | onal Chorus Councilor | | |
| A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. | | | |
| | 7.a. Nature of Interest, Transaction, or Income. | | |
| 6. Name and address of Employer (including trade name if any) | To fulfill my obligation as a Tony Voter for the annual Tony Awards I received two | | |
| Name David Stone | complimentary tickets (plus acc impanying promotional material) to attend Wicked The producers who provided the tickets were obligated by the American Theatre | | |
| Trade Name if any 321 Theatrical Management | | | |
| PO Box, Bidg Room No If any Suite 801 | 7.b. Amount. | | |
| Street 321 West 44th Street | Potential street value of | | |
| at New York | about \$ 19000 | | |
| State NY ZIP Code +4 10036 | <i>J</i> | | |
| Signature | | | |
| 15 Signature and ventication. The undersigned declares under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief true correct, and complete (See the se | ving documents), has been examined by the signatory and is, to the best of the | | |
| signed barvet Bots | on 8/12/2005 212-869-8530 | | |

Date

Telephone Number